

County: Rock
 ROCK COUNTY HEALTH CARE CENTER
 P. O. BOX 351

Facility ID: 7720

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JANESVILLE 53547 Phone: (608) 757-5000
 Operated from 1/1 To 12/31 Days of Operation: 365
 Operate in Conjunction with Hospital? No
 Number of Beds Set Up and Staffed (12/31/01): 200
 Total Licensed Bed Capacity (12/31/01): 352
 Number of Residents on 12/31/01: 200

Ownership:
 Highest Level License:
 Operate in Conjunction with CBRF? No
 Title 18 (Medicare) Certified? Yes
 Title 19 (Medicaid) Certified? Yes
 Average Daily Census: 232

City/County
 Skilled

Services Provided to Non-Residents		Age, Sex, and Primary Diagnosis of Residents (12/31/01)				Length of Stay (12/31/01)		%
Home Health Care	No	Primary Diagnosis	%	Age Groups	%	Less Than 1 Year		1.0
Supp. Home Care-Personal Care	No					1 - 4 Years		40.0
Supp. Home Care-Household Services	No	Developmental Disabilities	1.0	Under 65	29.0	More Than 4 Years		59.0
Day Services	No	Mental Illness (Org./Psy)	37.0	65 - 74	15.0			-----
Respite Care	No	Mental Illness (Other)	24.5	75 - 84	30.5			100.0
Adult Day Care	Yes	Alcohol & Other Drug Abuse	0.0	85 - 94	21.5	*****		
Adult Day Health Care	No	Para-, Quadra-, Hemiplegic	1.0	95 & Over	4.0	Full-Time Equivalent		
Congregate Meals	No	Cancer	1.0		-----	Nursing Staff per 100 Residents		
Home Delivered Meals	No	Fractures	1.0		100.0	(12/31/01)		
Other Meals	No	Cardiovascular	2.5	65 & Over	71.0	-----		
Transportation	No	Cerebrovascular	3.5		-----	RNs		16.0
Referral Service	No	Diabetes	0.5	Sex	%	LPNs		6.3
Other Services	No	Respiratory	1.0		-----	Nursing Assistants,		
Provide Day Programming for		Other Medical Conditions	27.0	Male	39.0	Aides, & Orderlies		
Mentally Ill	No		-----	Female	61.0			
Provide Day Programming for			100.0		-----			
Developmentally Disabled	No				100.0			

Method of Reimbursement

Level of Care	Medi care (Title 18)			Medi caid (Title 19)			Other		Pri vate Pay			Fami ly Care			Managed Care			Total Resi - dents	% Of All	
	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%	Per Di em (\$)	No.	%			Per Di em (\$)
Int. Skilled Care	0	0.0	0	6	3.1	120	0	0.0	0	1	14.3	254	0	0.0	0	0	0.0	0	7	3.5
Skilled Care	0	0.0	0	149	77.2	101	0	0.0	0	4	57.1	227	0	0.0	0	0	0.0	0	153	76.5
Intermediate	---	---	---	33	17.1	83	0	0.0	0	1	14.3	195	0	0.0	0	0	0.0	0	34	17.0
Limited Care	---	---	---	1	0.5	70	0	0.0	0	1	14.3	164	0	0.0	0	0	0.0	0	2	1.0
Personal Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Residential Care	---	---	---	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Dev. Disabled	---	---	---	4	2.1	153	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	4	2.0
Traumatic Brain Inj	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Ventilator-Dependent	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0	0	0	0.0
Total	0	0.0		193	100.0		0	0.0		7	100.0		0	0.0		0	0.0		200	100.0

Admissions, Discharges, and Deaths During Reporting Period		Percent Distribution of Residents' Conditions, Services, and Activities as of 12/31/01				
				% Needing Assistance of One Or Two Staff	% Totally Dependent	Total Number of Residents
Percent Admissions from		Activities of	%			
Private Home/No Home Health	40.0	Daily Living (ADL)	Independent			
Private Home/With Home Health	0.0	Bathing	1.5	53.5	45.0	200
Other Nursing Homes	0.0	Dressing	8.5	59.5	32.0	200
Acute Care Hospitals	20.0	Transferring	31.0	36.5	32.5	200
Psych. Hosp. -MR/DD Facilities	40.0	Toilet Use	21.0	40.5	38.5	200
Rehabilitation Hospitals	0.0	Eating	18.0	66.5	15.5	200
Other Locations	0.0	*****				
Total Number of Admissions	5	Continence	%	Special Treatments		%
Percent Discharges To:		Indwelling Or External Catheter	12.5	Receiving Respiratory Care		4.0
Private Home/No Home Health	6.0	Occ/Freq. Incontinent of Bladder	54.0	Receiving Tracheostomy Care		1.5
Private Home/With Home Health	0.0	Occ/Freq. Incontinent of Bowel	50.0	Receiving Suctioning		0.5
Other Nursing Homes	25.4			Receiving Ostomy Care		5.0
Acute Care Hospitals	6.0	Mobility		Receiving Tube Feeding		7.0
Psych. Hosp. -MR/DD Facilities	1.5	Physically Restrained	7.0	Receiving Mechanically Altered Diets		14.0
Rehabilitation Hospitals	0.0					
Other Locations	6.0	Skin Care		Other Resident Characteristics		
Deaths	55.2	With Pressure Sores	4.0	Have Advance Directives		63.0
Total Number of Discharges (Including Deaths)	67	With Rashes	13.0	Medications		
				Receiving Psychoactive Drugs		72.0

Selected Statistics: This Facility Compared to All Similar Metropolitan Area Facilities & Compared to All Facilities

	This Facility %	Ownership: Government Peer Group %	Ratio	Bed Size: 200+ Peer Group %	Ratio	Licensure: Skilled Peer Group %	Ratio	All Facilities %	Ratio
Occupancy Rate: Average Daily Census/Licensed Beds	65.7	81.4	0.81	84.7	0.78	84.3	0.78	84.6	0.78
Current Residents from In-County	94.0	84.1	1.12	82.2	1.14	82.7	1.14	77.0	1.22
Admissions from In-County, Still Residing	40.0	32.4	1.23	22.3	1.79	21.6	1.85	20.8	1.92
Admissions/Average Daily Census	2.2	64.0	0.03	89.0	0.02	137.9	0.02	128.9	0.02
Discharges/Average Daily Census	28.9	66.7	0.43	93.1	0.31	139.0	0.21	130.0	0.22
Discharges To Private Residence/Average Daily Census	1.7	19.2	0.09	37.0	0.05	55.2	0.03	52.8	0.03
Residents Receiving Skilled Care	80.0	85.0	0.94	89.9	0.89	91.8	0.87	85.3	0.94
Residents Aged 65 and Older	71.0	84.3	0.84	87.3	0.81	92.5	0.77	87.5	0.81
Title 19 (Medicaid) Funded Residents	96.5	77.7	1.24	73.2	1.32	64.3	1.50	68.7	1.40
Private Pay Funded Residents	3.5	16.8	0.21	19.8	0.18	25.6	0.14	22.0	0.16
Developmentally Disabled Residents	1.0	3.2	0.31	2.4	0.42	1.2	0.85	7.6	0.13
Mentally Ill Residents	61.5	56.2	1.09	42.5	1.45	37.4	1.65	33.8	1.82
General Medical Service Residents	27.0	15.4	1.76	25.0	1.08	21.2	1.27	19.4	1.39
Impaired ADL (Mean)	58.6	49.2	1.19	51.7	1.13	49.6	1.18	49.3	1.19
Psychological Problems	72.0	65.9	1.09	59.8	1.20	54.1	1.33	51.9	1.39
Nursing Care Required (Mean)	6.1	7.6	0.81	7.3	0.83	6.5	0.94	7.3	0.83